



Express Mail No. EV475141793US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Morton I. Hyson Confirmation No.: 7856
Serial No.: 09/936,075 Art Unit: 3731
Filed: July 16, 2002 Examiner: Tan-Uyen T. Ho
For: MEDICATED WRAP Attorney Docket No: 10071-017-999

FEE TRANSMITTAL SHEET

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The fee required to be filed with the accompanying amendment of even date herewith concerning the above-identified application has been estimated to be \$0.00.

The claim amendment fee has been estimated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)		<input checked="" type="checkbox"/> SMALL ENTITY		<input type="checkbox"/> OTHER THAN A SMALL ENTITY	
CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NO. PREVIOUSLY PAID	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE	
TOTAL	42	MINUS	42	0	x 25	\$ 0.00	x 50	\$	
INDEP.	2	MINUS	2	0	x 100	\$ 0.00	x 200	\$	
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					\$ 0.00		\$		
				TOTAL	\$ 0.00	OR	TOTAL	\$	

Please charge the required fee to Jones Day Deposit Account No. 50-3013. A copy of this sheet is enclosed.

Respectfully submitted,

Date: December 15, 2005

Samuel B. Abrams 30,605
Samuel B. Abrams (Reg. No.)
By: Michael J. Ryan 41,283
Michael J. Ryan (Reg. No.)

JONES DAY
222 East 41st Street
New York, New York 10017
(212) 326-3939



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AMENDMENT AND RESPONSE UNDER 37 C.F.R. § 1.111

MAIL STOP AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 15, 2005, (the "Office Action") please enter the amendments and consider the remarks below. Applicant submits herewith (a) a Petition for an Extension of Time for three (3) months from September 15, 2005 up to and including December 15, 2005, with provision for payment of the required fee; and (b) an Amendment Fee Transmittal Sheet.

Amendments to the Claims are reflected in the listing of claims which begins at page 2 of this paper.

Remarks begin at page 11 of this paper.